

City of Emeryville

1333 Park Avenue. Emeryville, CA 94608-3517 t (510) 596-4300 | f (510) 596-4389

Cannabis Business Background Check Application Form

APPLICANT INFORMATION								
Full Name			Email		Pho	Phone No.		
Mailing Address			City		State	Zip	Code	
		BUSINESS	INFORMATION					
Business Name				Business Type				
Primary Business Owner			Secondary Business Owner (if applicable)					
Mailing Address			City		State	tate Zip Code		
Mair	Main Phone No. Alternate Phone No. Fax No.							
		SUPPLEMENT	TAL INFORMATION					
Des	ignation: Cannabis Busi	iness Owner	□ Cannabis Key Er	nploye	ee [□ Deliv	ery Driver	
"Cannabis Business Owner" is defined as 1) person or entity having an ownership interest in the Commercial Cannabis Business other than a security interest, lien, or encumbrance on property that will be used by the Commercial Cannabis Business; 2) the chief executive officer or any person or entity of a publicly traded Commercial Cannabis Business with an aggregate ownership interest of five percent (5%) or more; or 3) person who participates in the direction, control, or management of, or has a financial interest in, the Commercial Cannabis Business. "Cannabis Key Employee" is defined as an employee of the Commercial Cannabis Business who makes or will								
make operational or management decisions that directly impact the business. "Delivery Driver" is defined as a person that will deliver Cannabis or Cannabis Product in the City. Such individuals must be at least 21 years of age at the time of submittal of this application.								
For more information on Cannabis regulations within the City of Emeryville, please refer to Chapter 28 of Title 5 of the Emeryville Municipal Code (www.codepublishing.com/CA/Emeryville).								
ALL PERSONNEL PLEASE COMPLETE THE FOLLOWING SECTION								
1)	Have you ever been convicted Section 667.5(c)?	d of a violent fel	ony, as specified in F	Penal	Code	□ Yes	□ No	
2)	2) Have you ever been convicted of a serious felony, as specified in Penal Code Section 1192.7?			□ Yes	□ No			
3)	Have you ever been convi embezzlement?	icted of a felo	ony involving fraud,	, dece	eit or	□ Yes	□ No	
4)	Have you ever been convicted minor in transporting, carrying peddling, any controlled subfurnishing, offering to furnishing substance to a minor?	ng, selling, givir stance to a mi	ng away, preparing f nor; or selling, offer	for sa ring to	le, or sell,	□ Yes	□ No	

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5)	enha	e you ever been convicted of a felony for drug trafficking with an ancement pursuant to Health and Safety Code Section 11370.4 or 798?		Yes		No
6)	Have you ever been convicted of a crime involving:					
	a)	Distribution of Cannabis or Cannabis Products to minors?		Yes		No
	b)	Generation of revenue from the sale of Cannabis or Cannabis Products to fund criminal enterprises, gangs and cartels?		Yes		No
	c)	Diversion of Cannabis or Cannabis Products to jurisdictions outside of the State of California where Cannabis and Cannabis Products are unlawful under state or local law?		Yes		No
	d)	Trafficking of other illegal drugs or facilitation of other illegal activity?		Yes		No
	e)	Violence and the use of firearms in the cultivation and distribution of Cannabis and Cannabis Products?		Yes		No
	f)	The use of public lands in the cultivation of Cannabis?		Yes		No
	g)	The use of federal property for Commercial Cannabis Activity?		Yes		No
If yo	u ans	swered "Yes" to any of the questions above, please provide an explanation	on fo	or each c	lues	tion.

DELIVERY DRIVERS ONLY						
1)	Are you required to register as a sex offender under Section 290 of the California Penal Code?	□ Ye	s 🗆	No		
2)	Within the past five (5) years from the date of this application, has the Department of Motor Vehicles suspended, revoked, or placed you on probation for a cause involving the safe operation of a motor vehicle?	□ Ye	s 🗆	No		
3)	Within the past five (5) years from the date of this application, have you be the following offenses:	en conv	icted of	any of		
	a) Driving under the influence?	□ Ye	s 🗆	No		
	b) Reckless driving involving bodily injury?	□ Ye	s 🗆	No		
	c) Failure to possess a valid driver's license?	□ Ye	s 🗆	No		
	d) Any offense punishable as a serious or violent felony?	□ Ye	s 🗆	No		
	e) Convicted of a crime of theft in either degree?	□ Ye	s 🗆	No		
4)	Within the past ten (10) years from the date of this application, have you been convicted of any crime against a person in either degree, or been a prohibited person in a restraining order?	□ Ye	s 🗆	No		
5)	Have you ever been convicted of any offense involving moral turpitude?	□ Ye	s 🗆	No		
6)	Have you ever been involved in a motor vehicle accident cause death or personal injury within the past two (2) years from the date of this application?	□ Ye	s 🗆	No		
7)	Have you been involved in three (3) or more motor vehicle accidents within the past one (1) year immediately preceding the date of this application?	□ Ye	s 🗆	No		

ELECTRONIC FINGERPRINT SCANNING

Each Cannabis Business Owner, as well as each key employee that makes or will make operational or management decisions that directly impact the business, shall submit a separate background check application, electronic fingerprint images and related information as required by the Police Chief for the purpose of obtaining information as to the existence and content of a record of state or federal convictions and arrests.

DISCLOSURE AND INDEMINIFICATION

The information provided in this application shall be confidential, and shall not be subject to public inspection or disclosure, except as may be required by federal, state or local law, or pursuant to valid subpoena or court order. Disclosure of information shall not be deemed a waiver of confidentiality by the applicant or any individual named in the application. The City shall incur no liability for the inadvertent or negligent disclosure or such information. Issued permits are not transferrable. The Police Chief reserves the right to seek additional information from the applicant(s) as allowed under applicable law.

I certify, under penalty of perjury, that all of the information contained within this application, and supporting documents as required by the City of Emeryville, is truthful and factual to the extent of my knowledge.

Moweage.					
Signature	Print Name	Date			
Submit application and all supporting documentation to:	City of Emeryville Police Department Attn: Police Chief 2449 Powell Street Emeryville, CA 94608				